

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000031392

FILED
Mar 25, 2009
Secretary of State

Entity Name: OAKES PUBLIC ADJUSTERS, LLC

Current Principal Place of Business:

7040 SEMINOLE PRATT WHITNEY RD, STE. 25-6
LOXAHATCHEE, FL 33470

New Principal Place of Business:

16726 70TH ST. NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

7040 SEMINOLE PRATT WHITNEY RD, STE. 25-6
LOXAHATCHEE, FL 33470

New Mailing Address:

16726 70TH ST. NORTH
LOXAHATCHEE, FL 33470

FEI Number: 20-8735071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKES, DELORES
7040 SEMINOLE PRATT WHITNEY RD, STE. 25-6
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

OAKES, DELORES
16726 70TH ST. NORTH
LOXAHATCHEE, FL 33470 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

03/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OAKES, DELORES
Address: 7040 SEMINOLE PRATT WHITNEY RD, STE. 25-6
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OAKES, DELORES
Address: 16726 70TH ST. NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DELORES H. OAKES

MGRM

03/25/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date